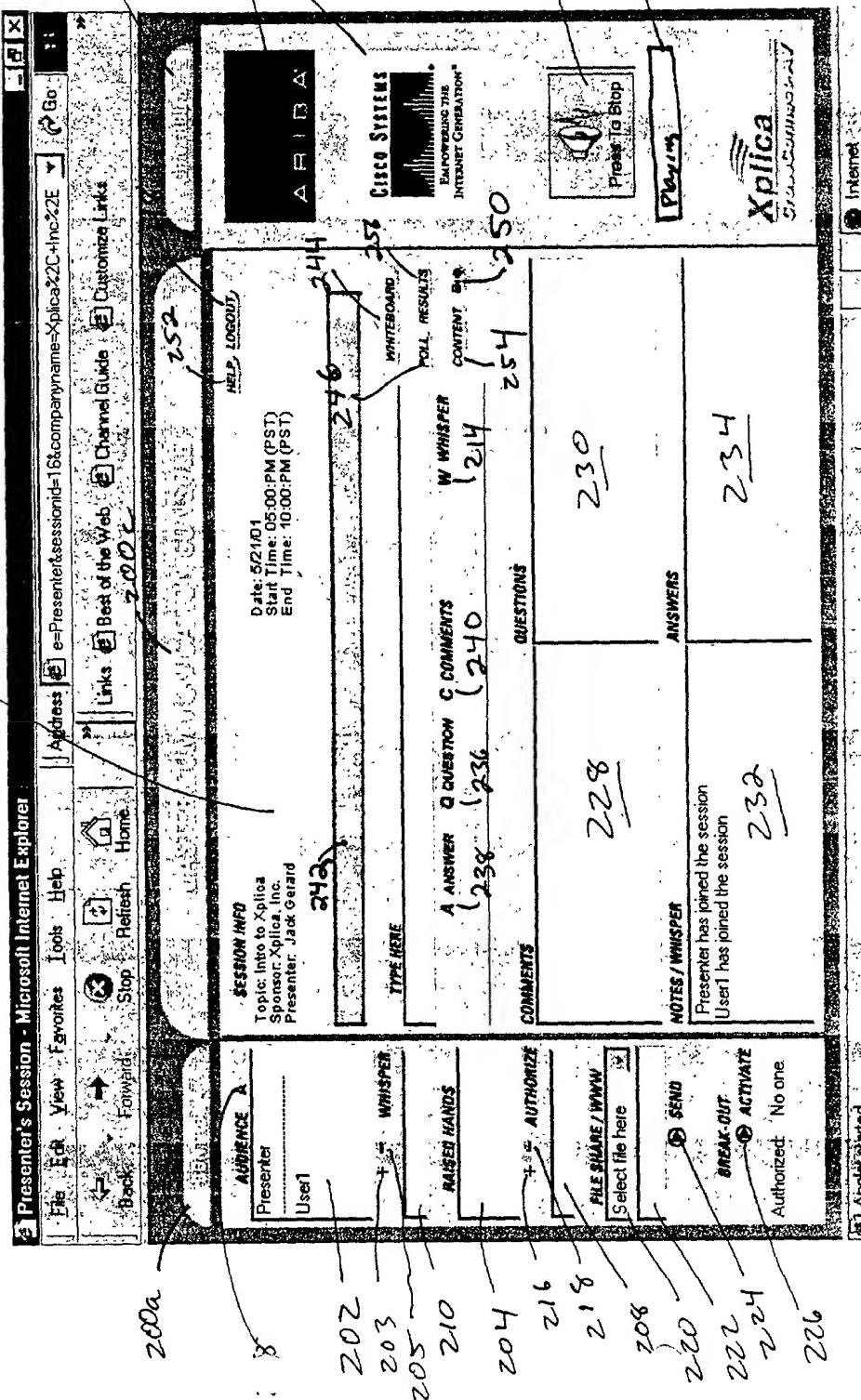
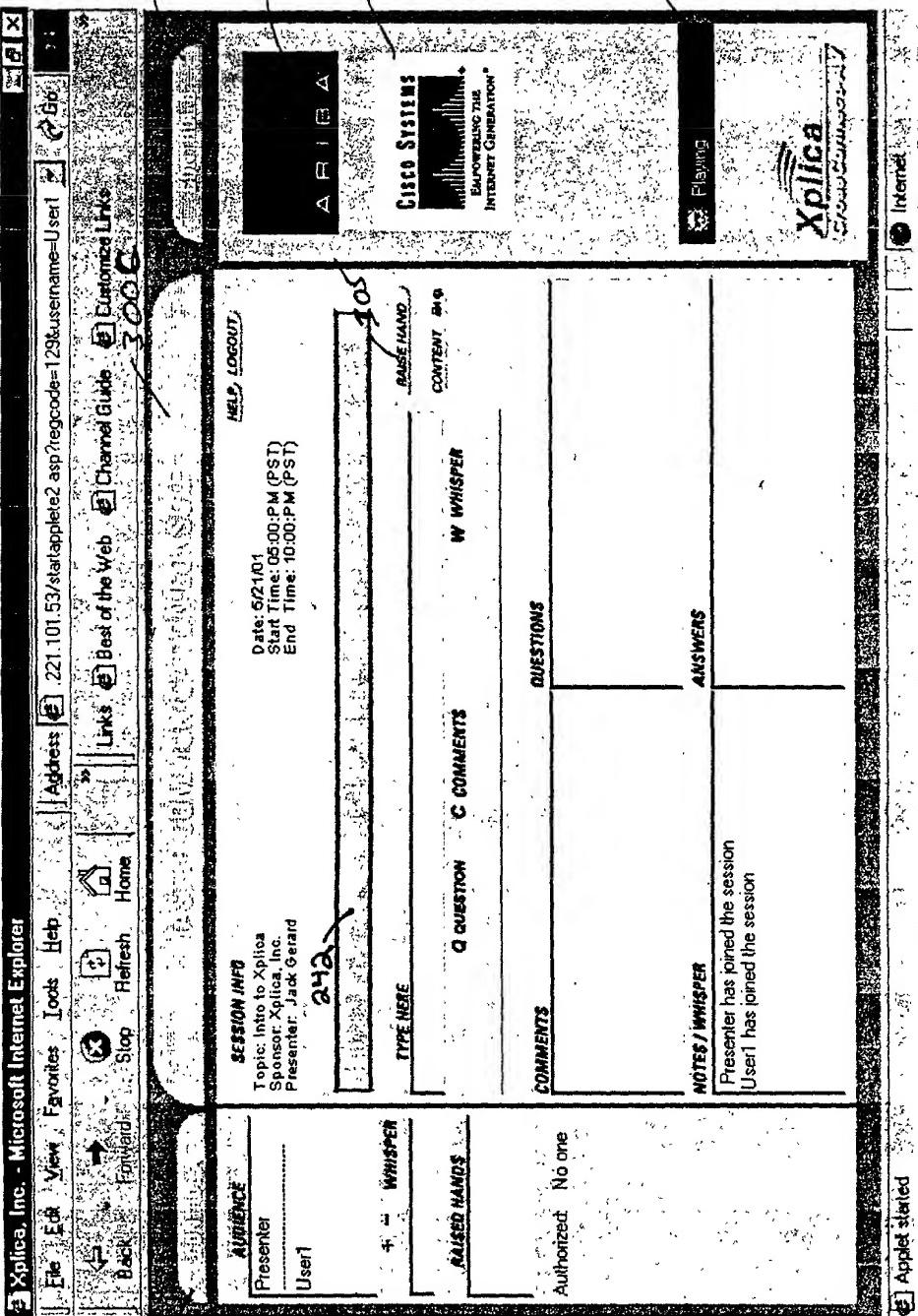


Figure 1

Fig 2





M  
G  
FF

Digitized by srujanika@gmail.com

490 492 494 → 400a

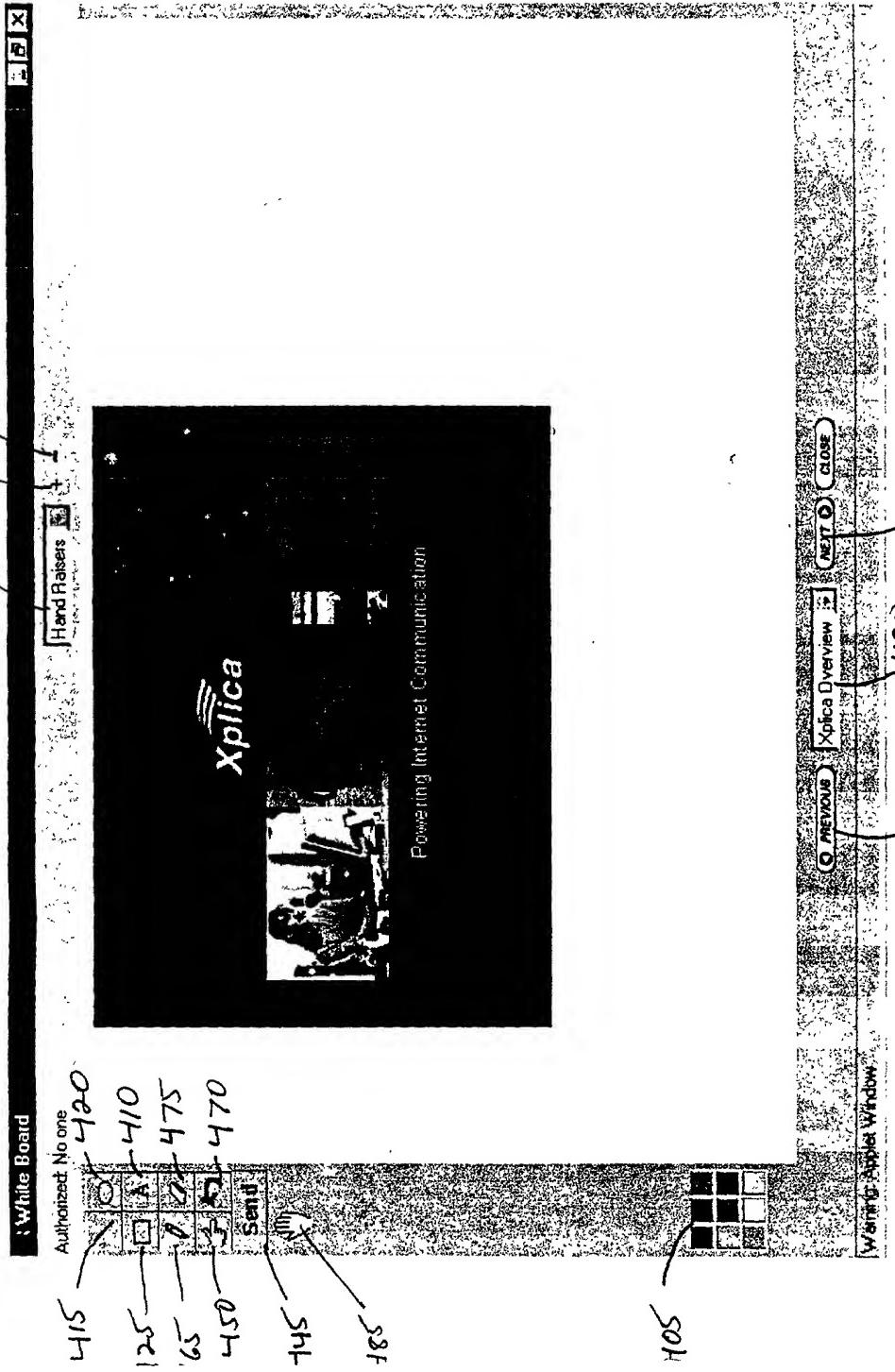


Fig 4a

400b

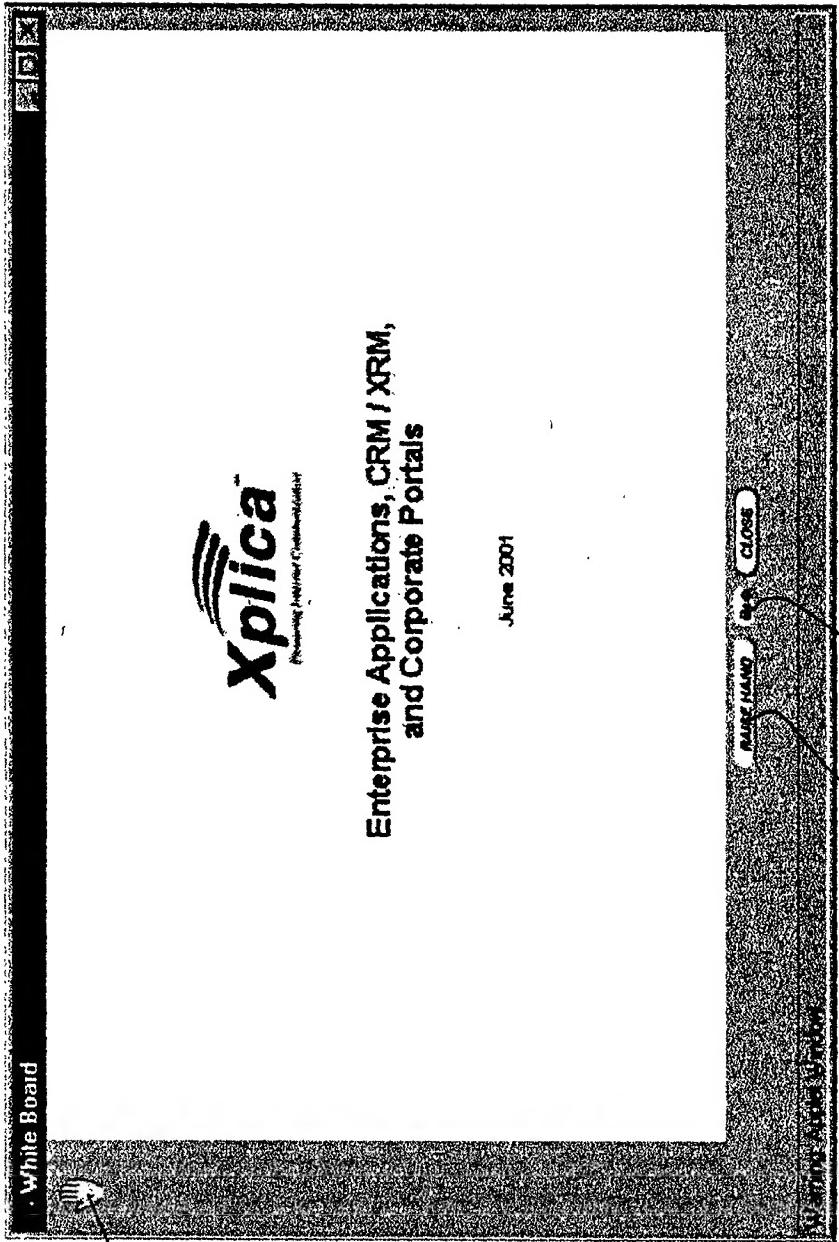


Figure 4b

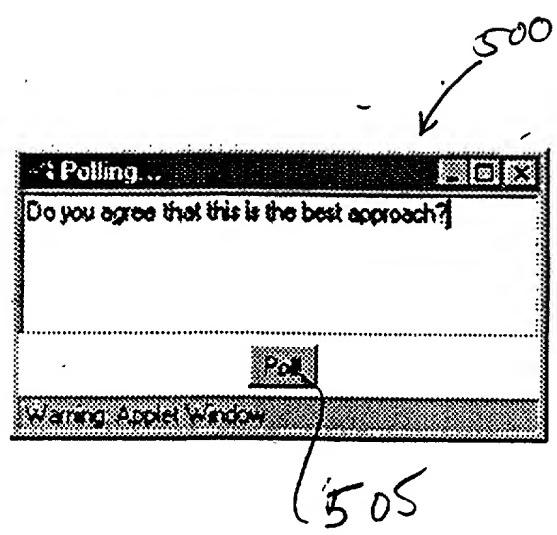


Figure 5a

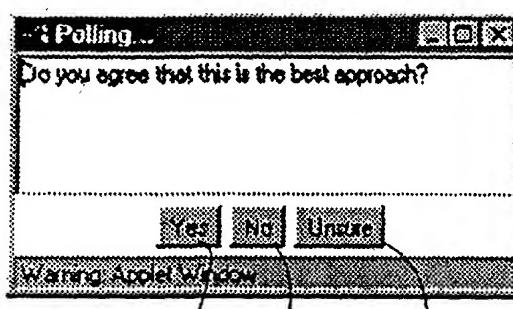


Figure 5b

530

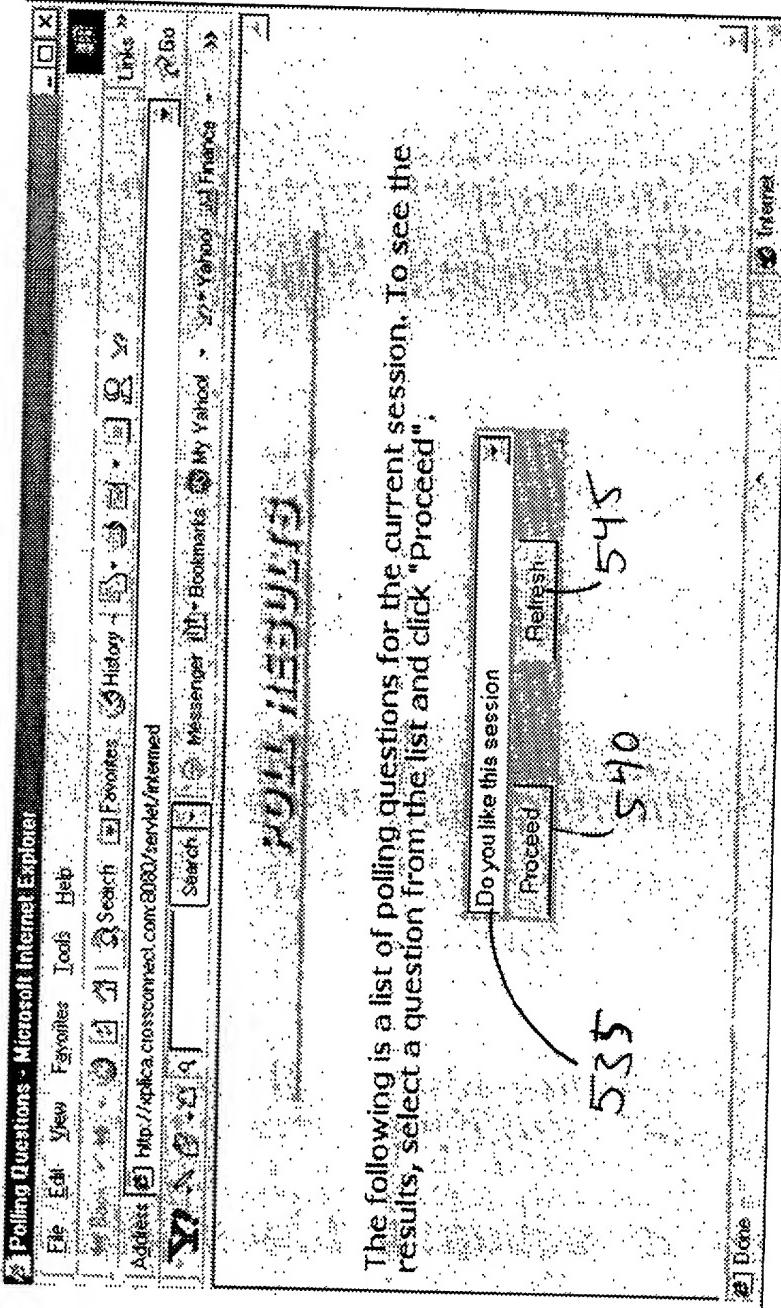


Figure 5c

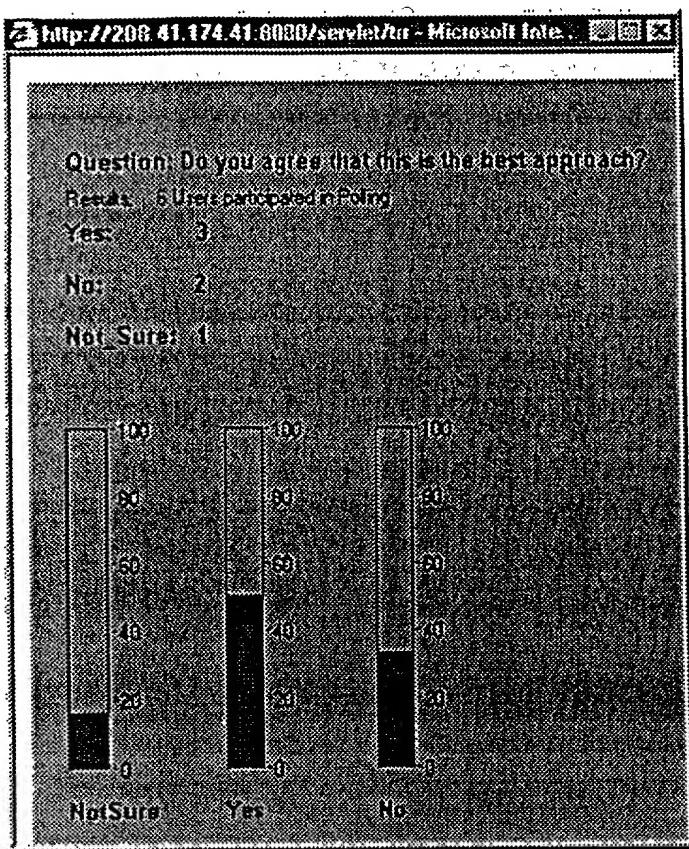


Fig. 5.d

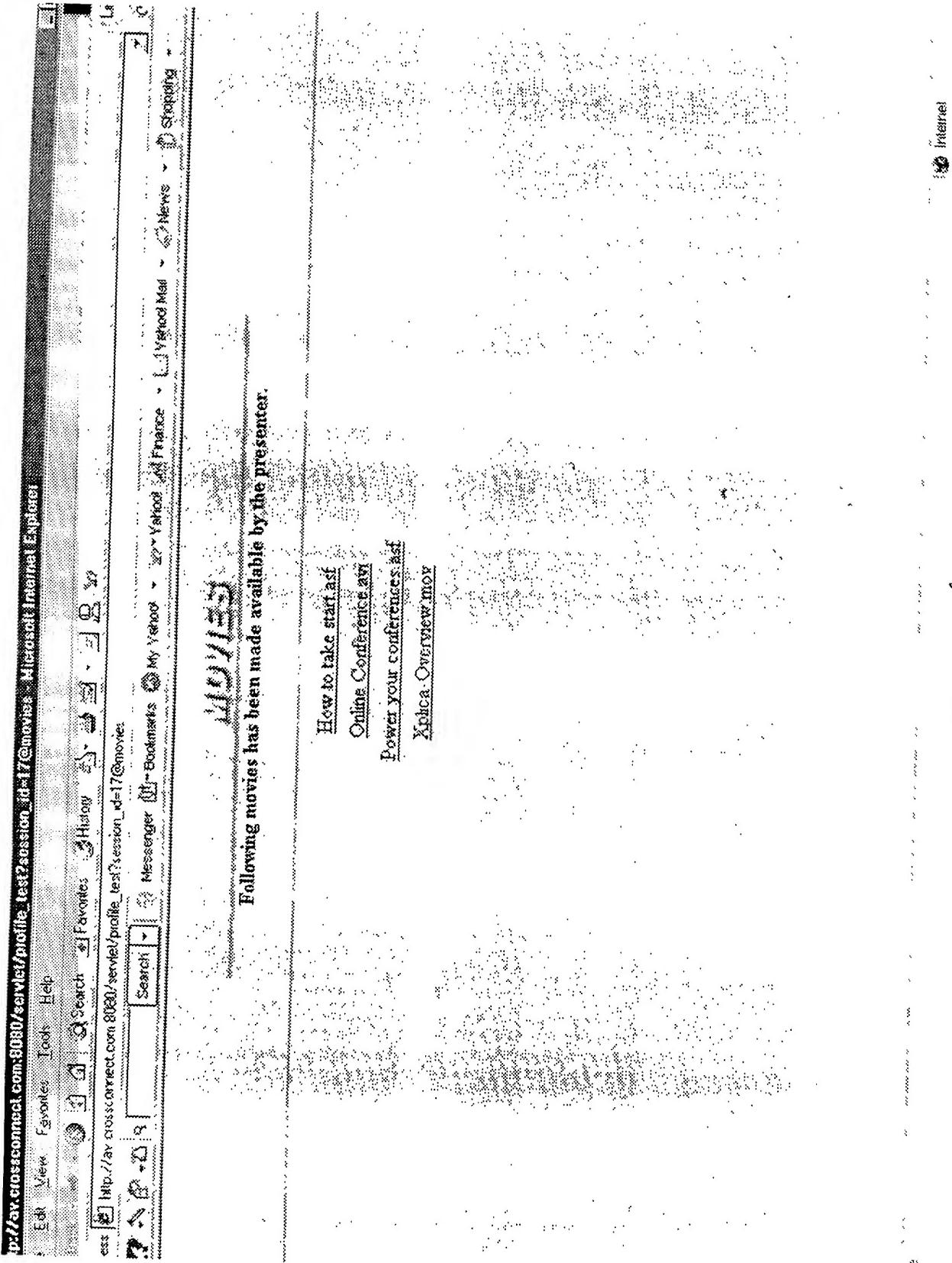


Figure 6

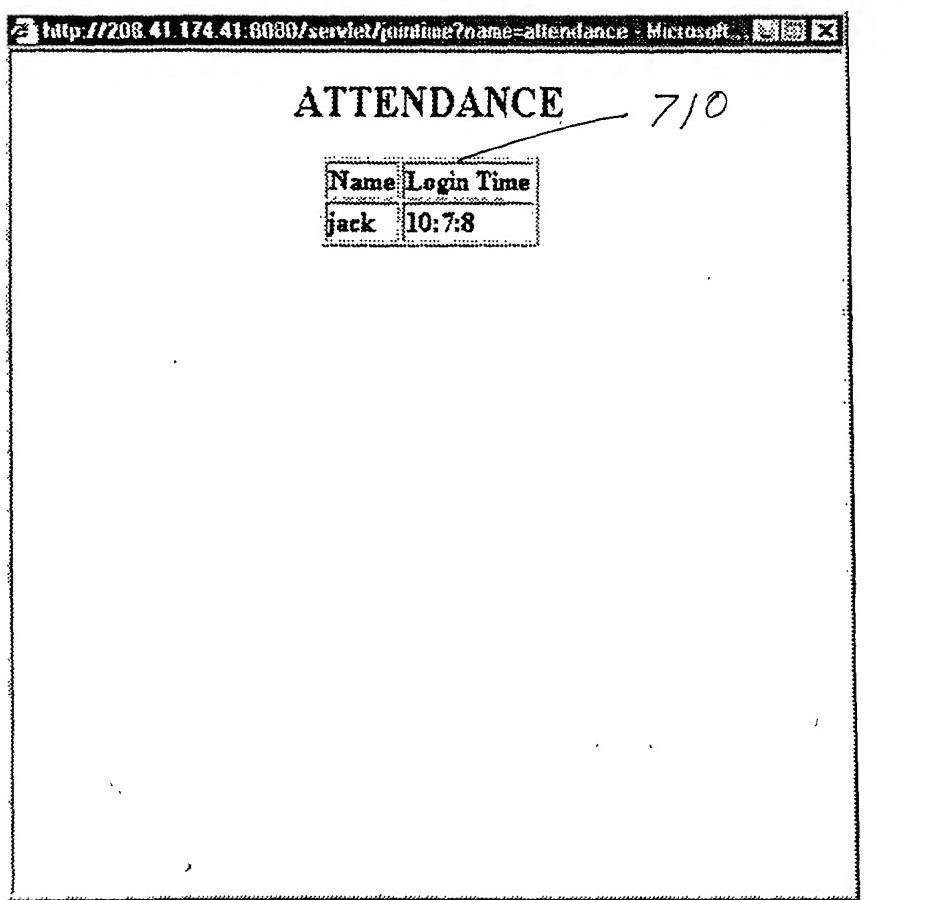


Fig. 7

# Homepage

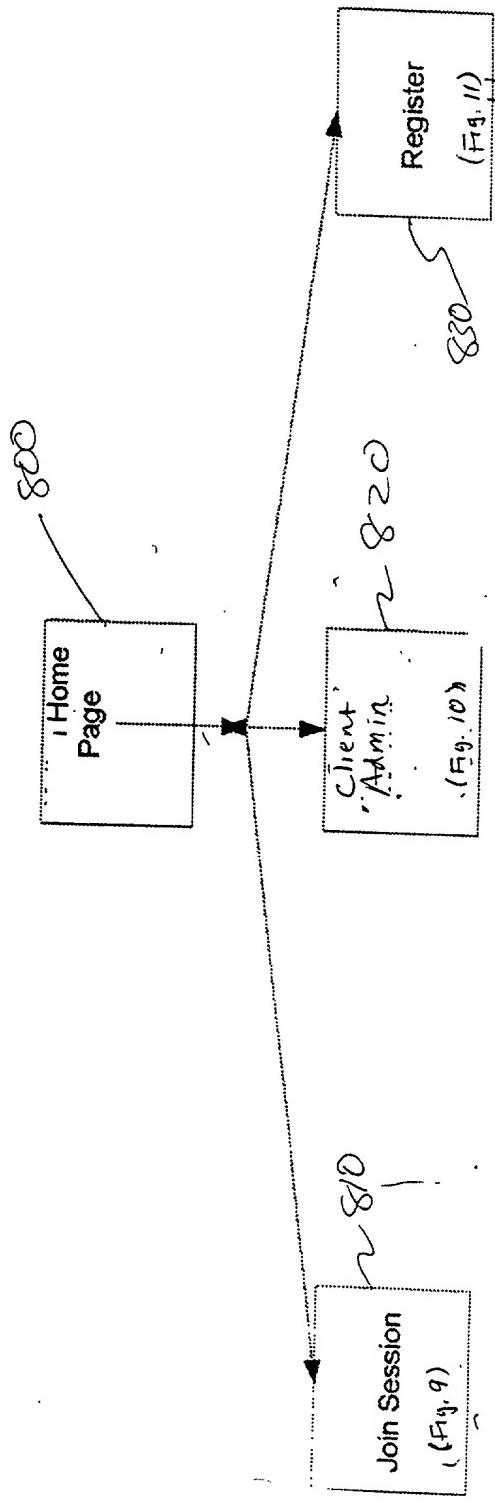


Fig. : 8'

## Join Session

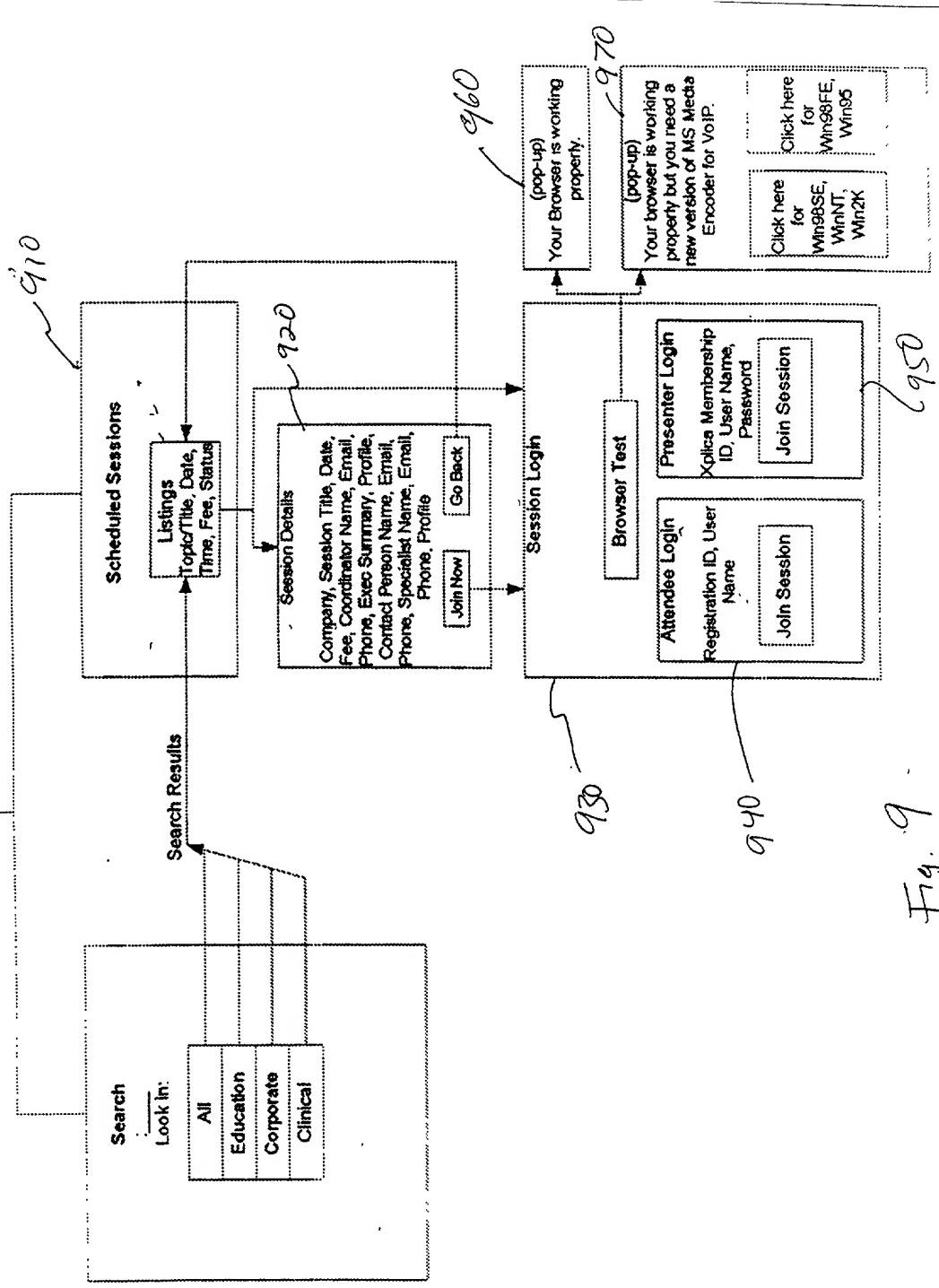


Fig. 9

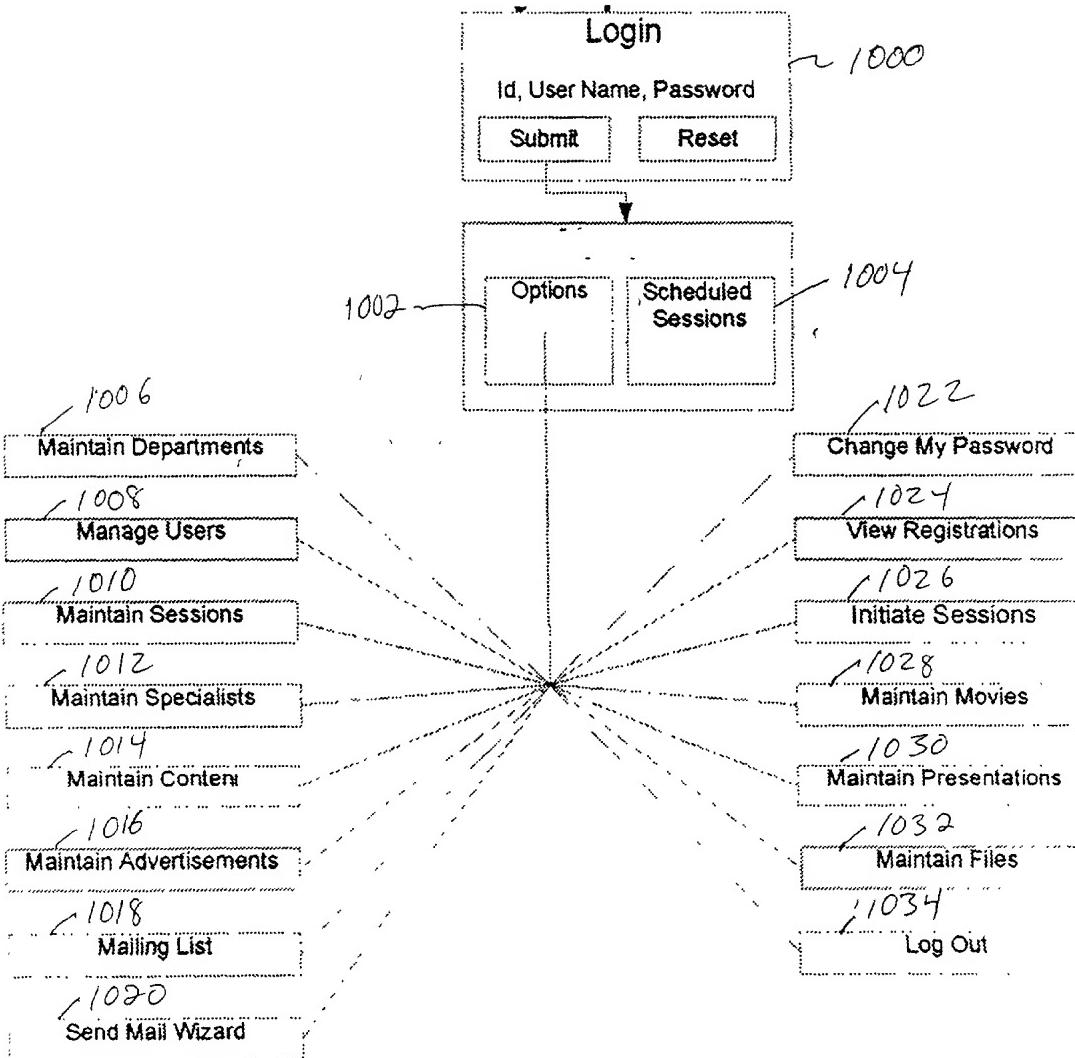
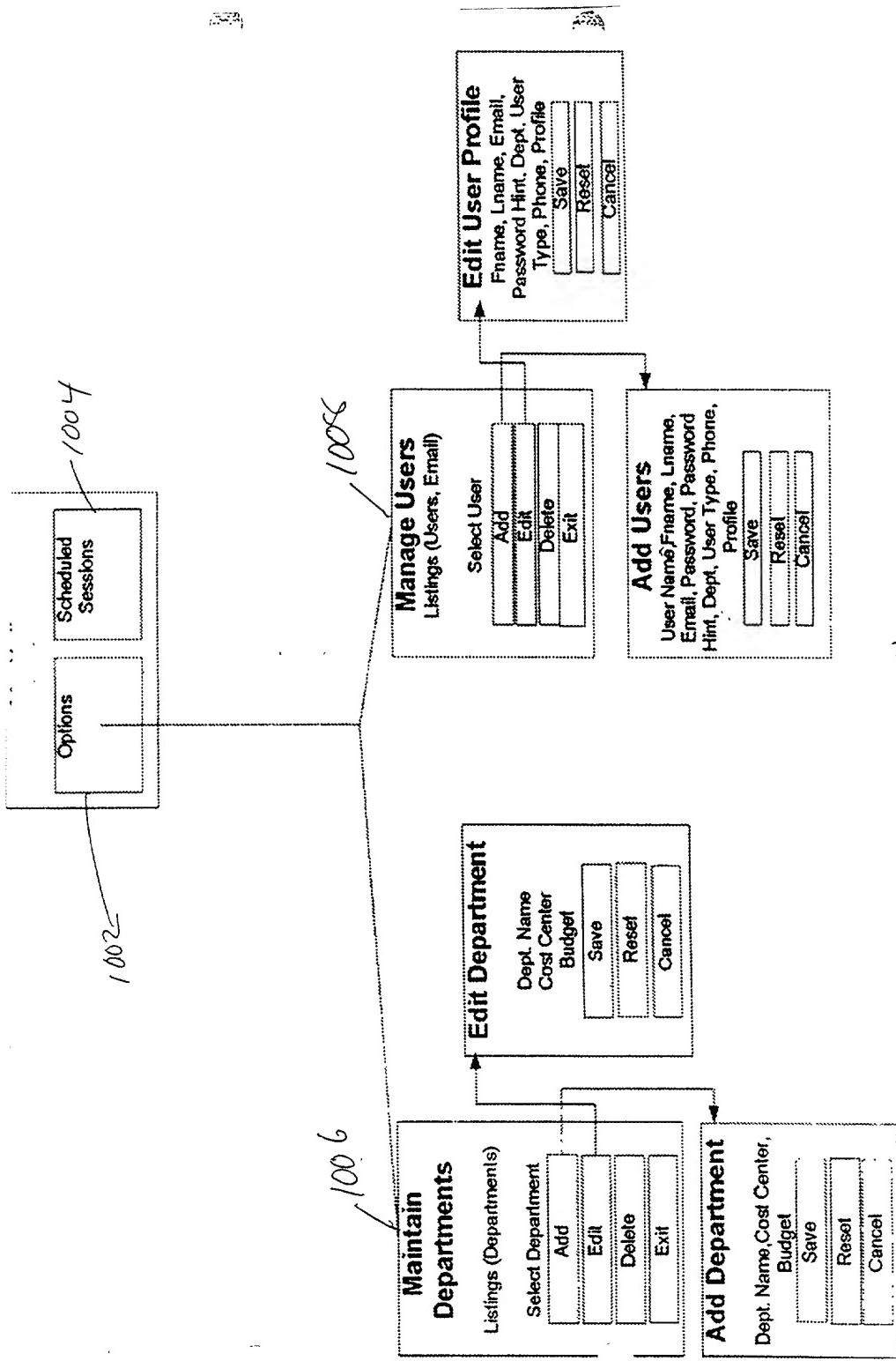
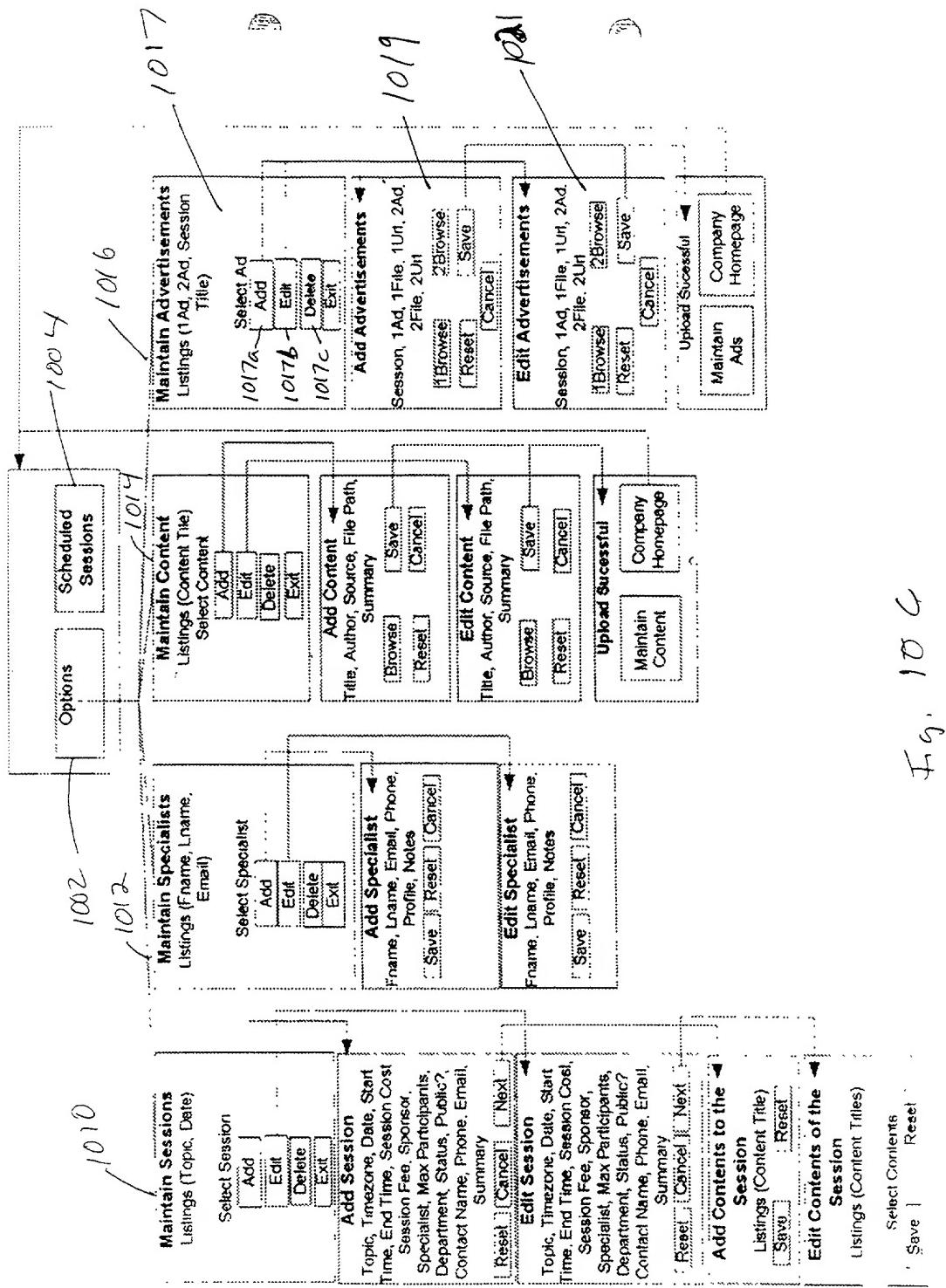
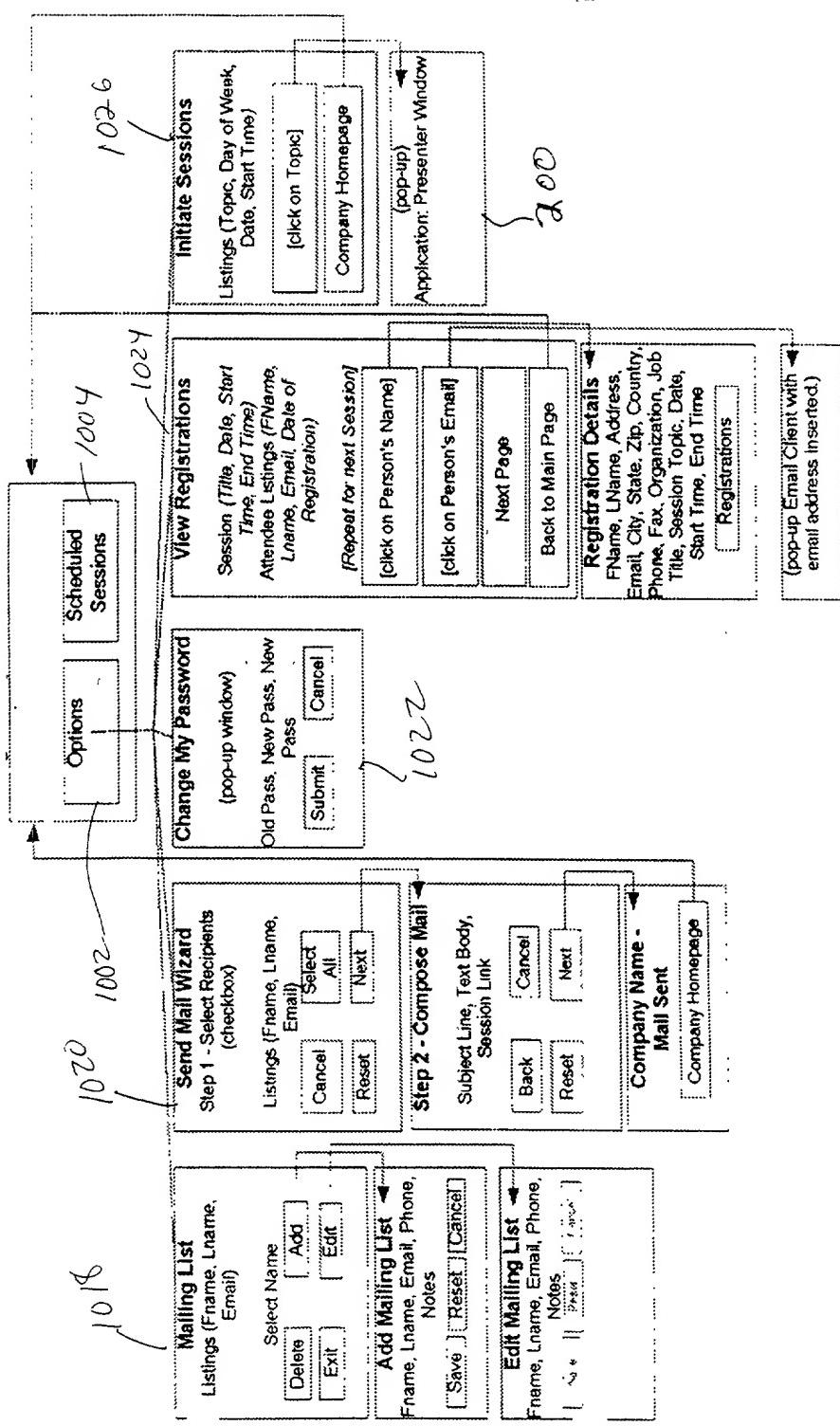


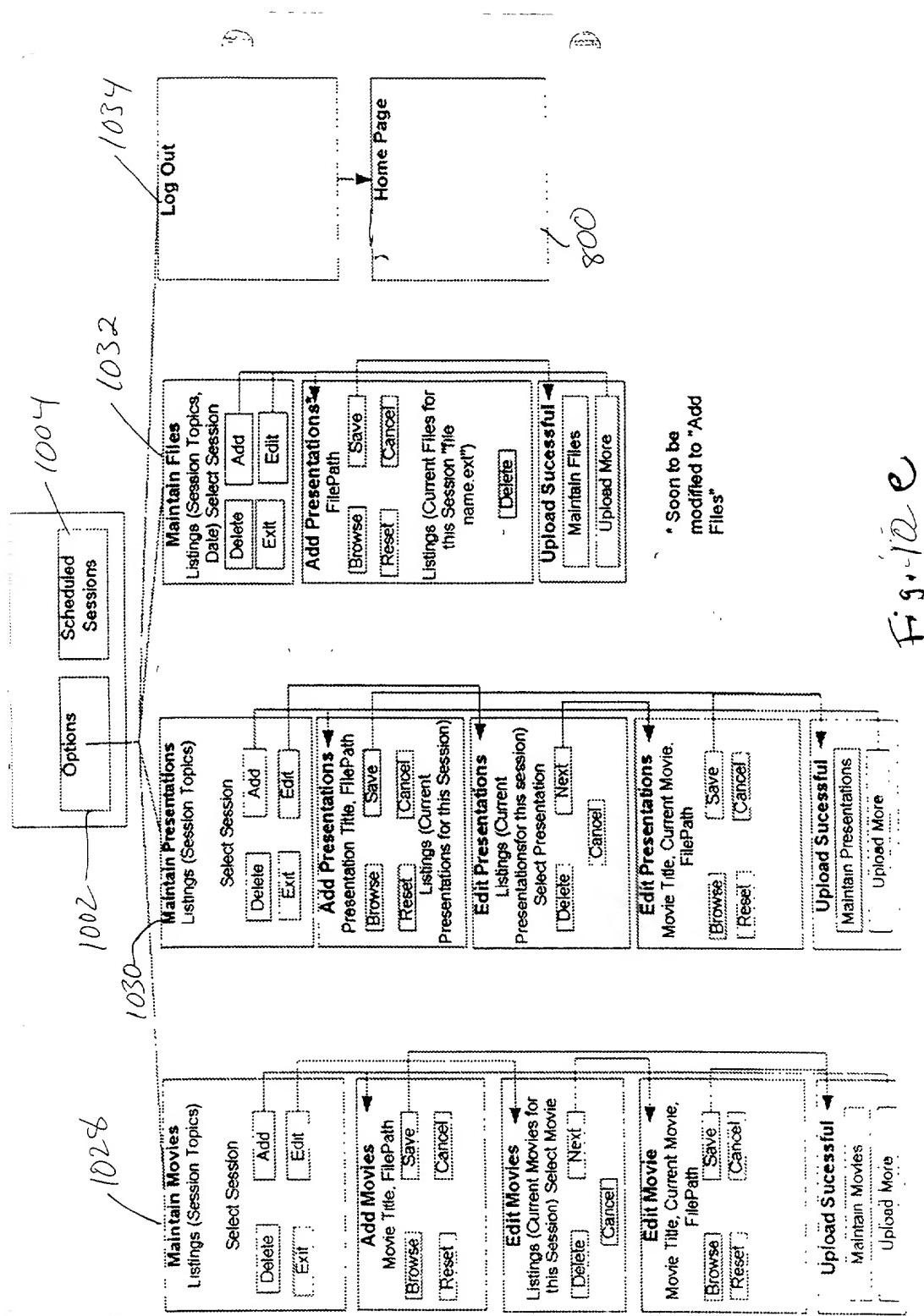
Fig. 10 : a







Trn. 10 d



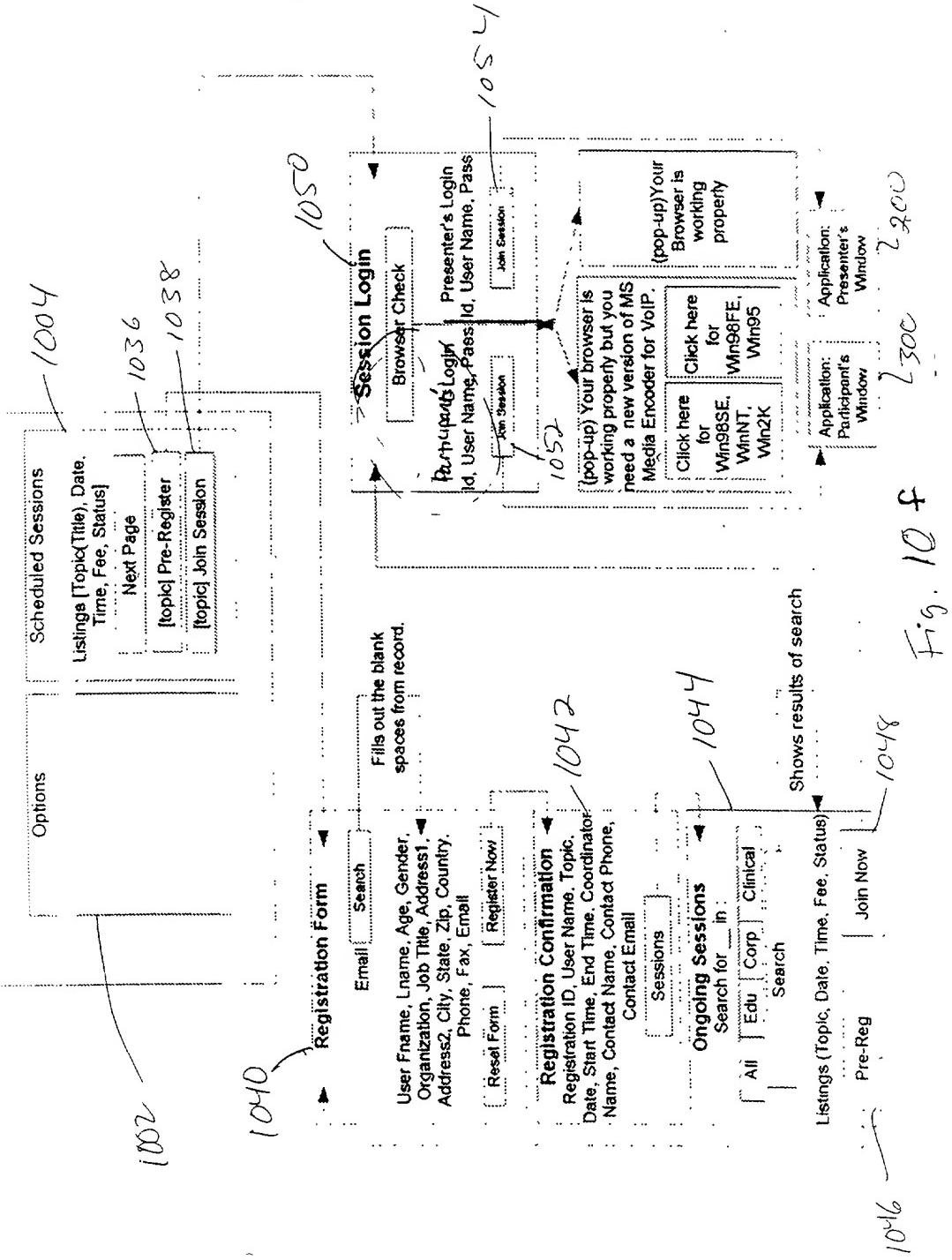


Fig. 10 f

2200

2300

2400

# Register

## New Company Setup - Step 1

Acct Type (Corporate,  
University, Clinic),  
User Name, Password,  
Password Hint

✓1100

## Company Setup - Step 2

Company Name, Industry,  
Company Description,  
Contact Name, Lname,  
Email, Address1, Address2,  
Phone, Fax, Billing Address  
(same as contact), Address1,  
Address2, City, State, Zip,  
Country

## University Setup - Step 2

Clinic Name, Industry,  
Company Description,  
Contact Name, Lname,  
Email, Address1, Address2,  
Phone, Fax, Billing Address  
(same as contact), Address1,  
Address2, City, State, Zip,  
Country

✓1120

## Clinic Setup - Step 2

Clinic Name, Industry,  
Company Description,  
Contact Name, Lname,  
Email, Address1, Address2,  
Phone, Fax, Billing Address  
(same as contact), Address1,  
Address2, City, State, Zip,  
Country

✓1130

## Setup Confirmation

Membership ID:  
✓1140  
Company Name, Contact  
Name, User Name, Phone,  
Fax, Billing Address1,  
Address2, City, State, Zip,  
Country, Contact Address1,  
Address2, City, State, Zip,  
Country

## Setup Confirmation

Membership ID:  
✓1150  
Clinic Name, Contact  
Name, User Name, Phone,  
Fax, Billing Address1,  
Address2, City, State, Zip,  
Country, Contact Address1,  
Address2, City, State, Zip,  
Country

## Setup Confirmation

Membership ID:  
✓1160  
Clinic Name, Contact  
Name, User Name, Phone,  
Fax, Billing Address1,  
Address2, City, State, Zip,  
Country, Contact Address1,  
Address2, City, State, Zip,  
Country

✓1151

## Setup Confirmation

Membership ID:  
✓1161  
Clinic Name, Contact  
Name, User Name, Phone,  
Fax, Billing Address1,  
Address2, City, State, Zip,  
Country, Contact Address1,  
Address2, City, State, Zip,  
Country

✓1162

Figure 12 -

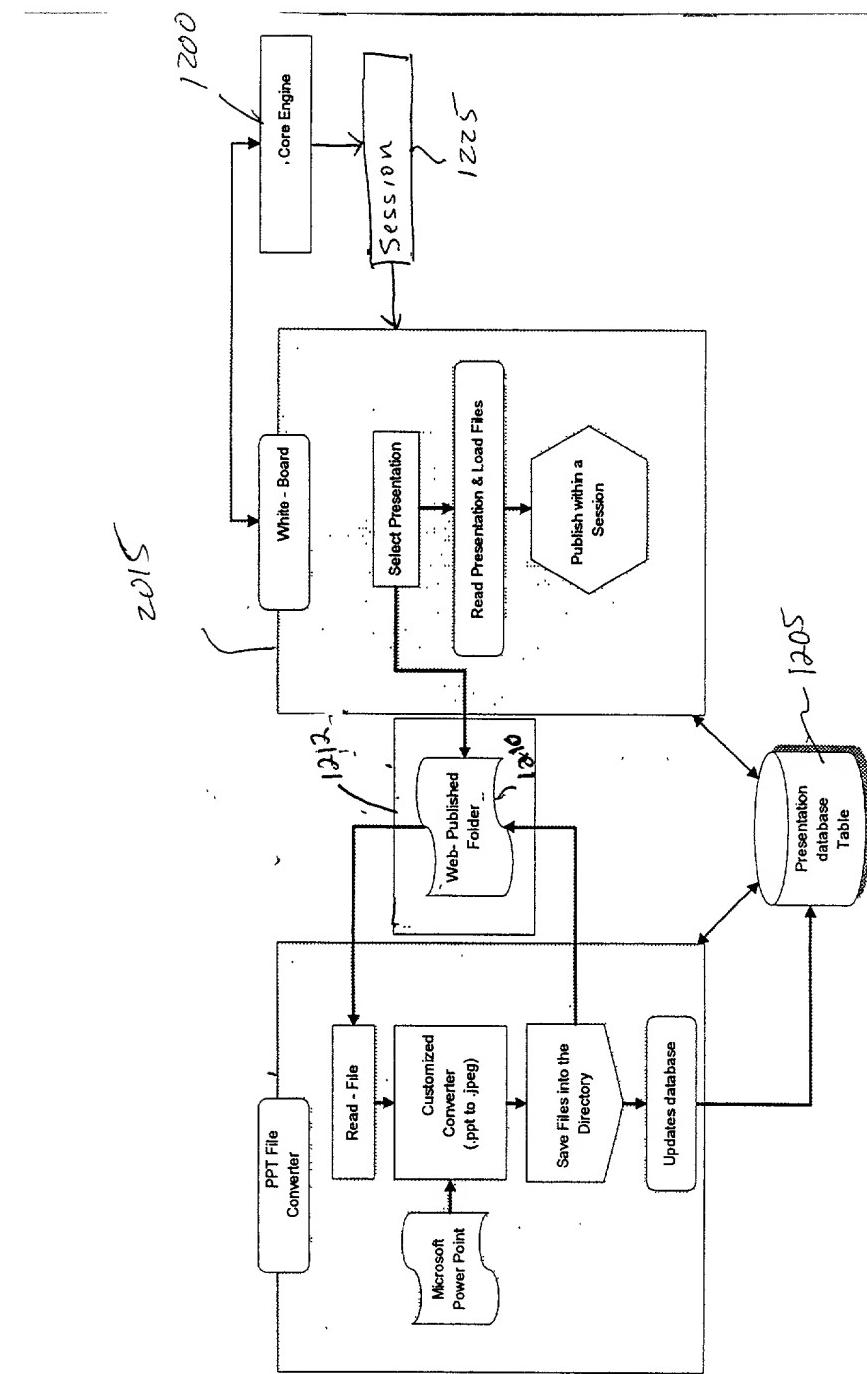
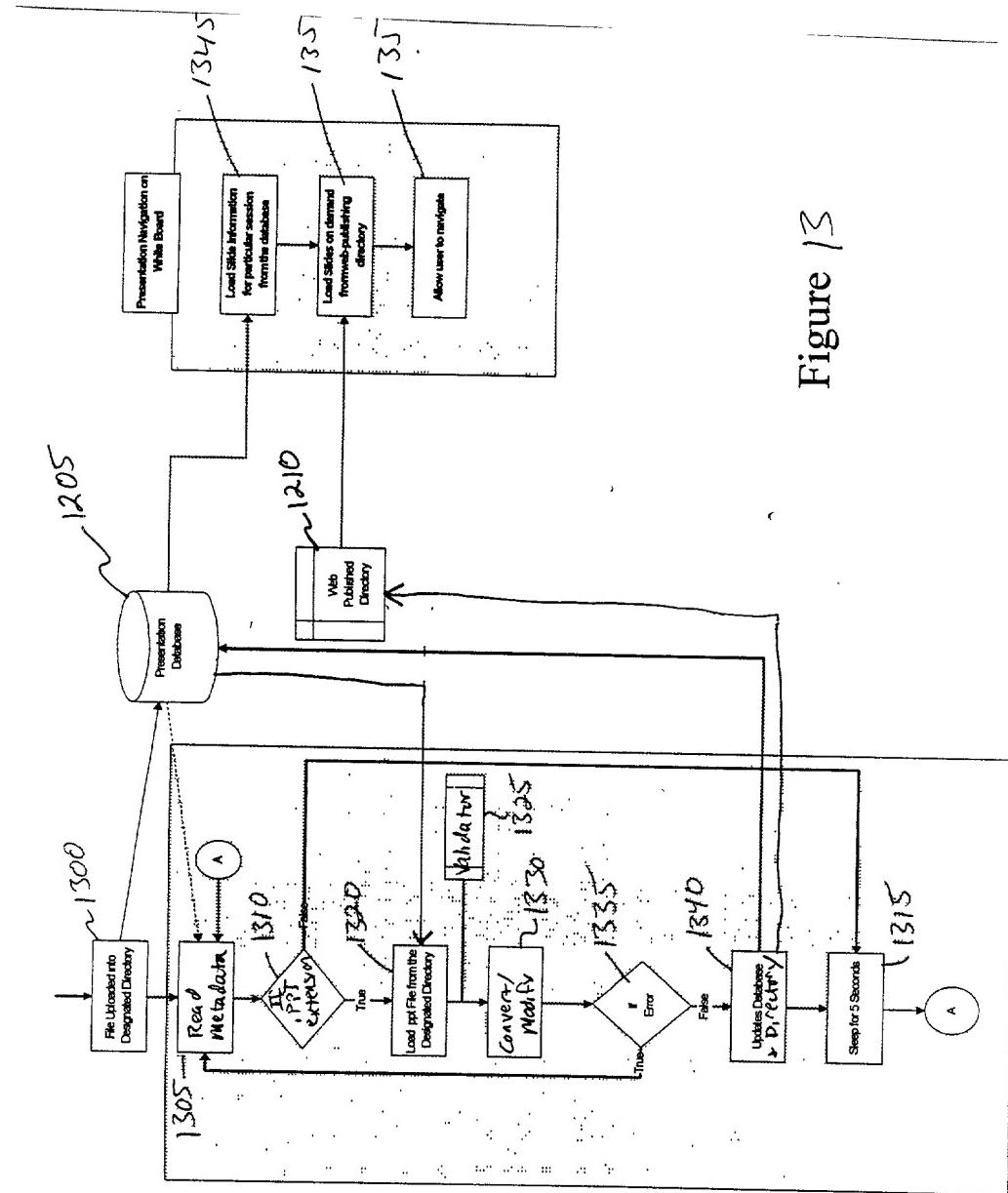


Figure 13



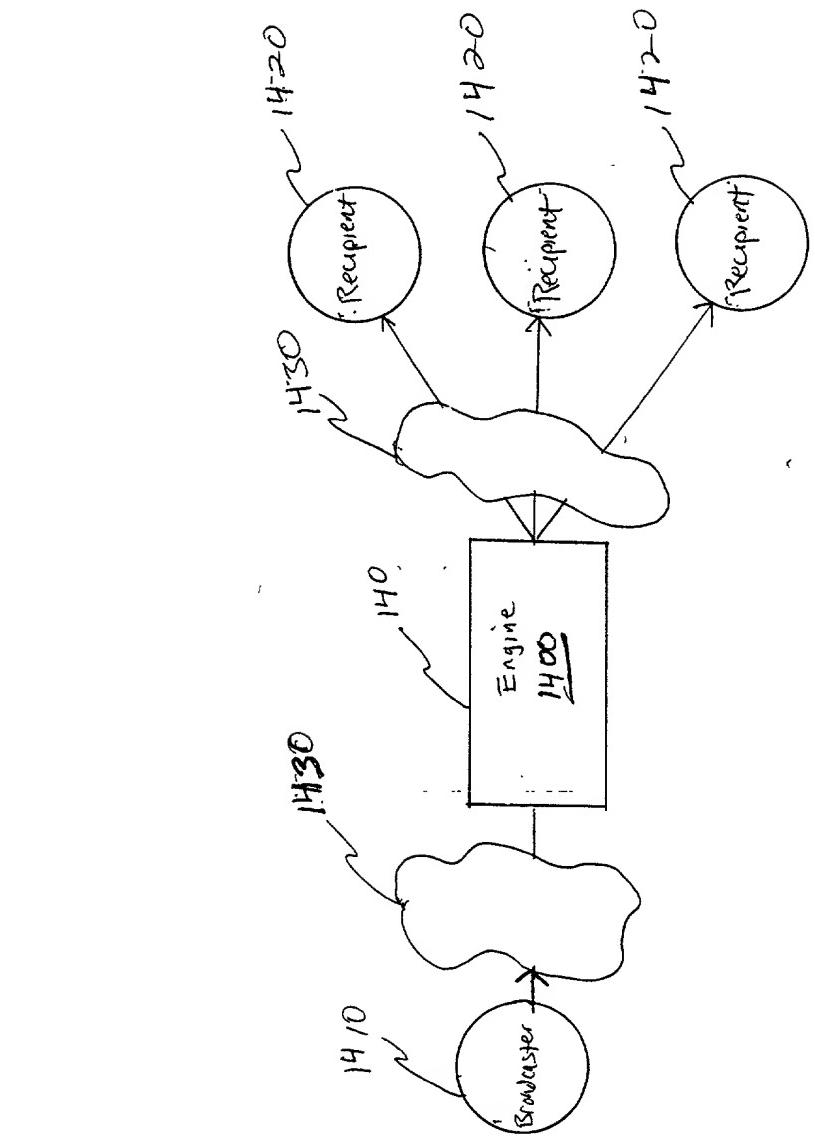


Figure 14

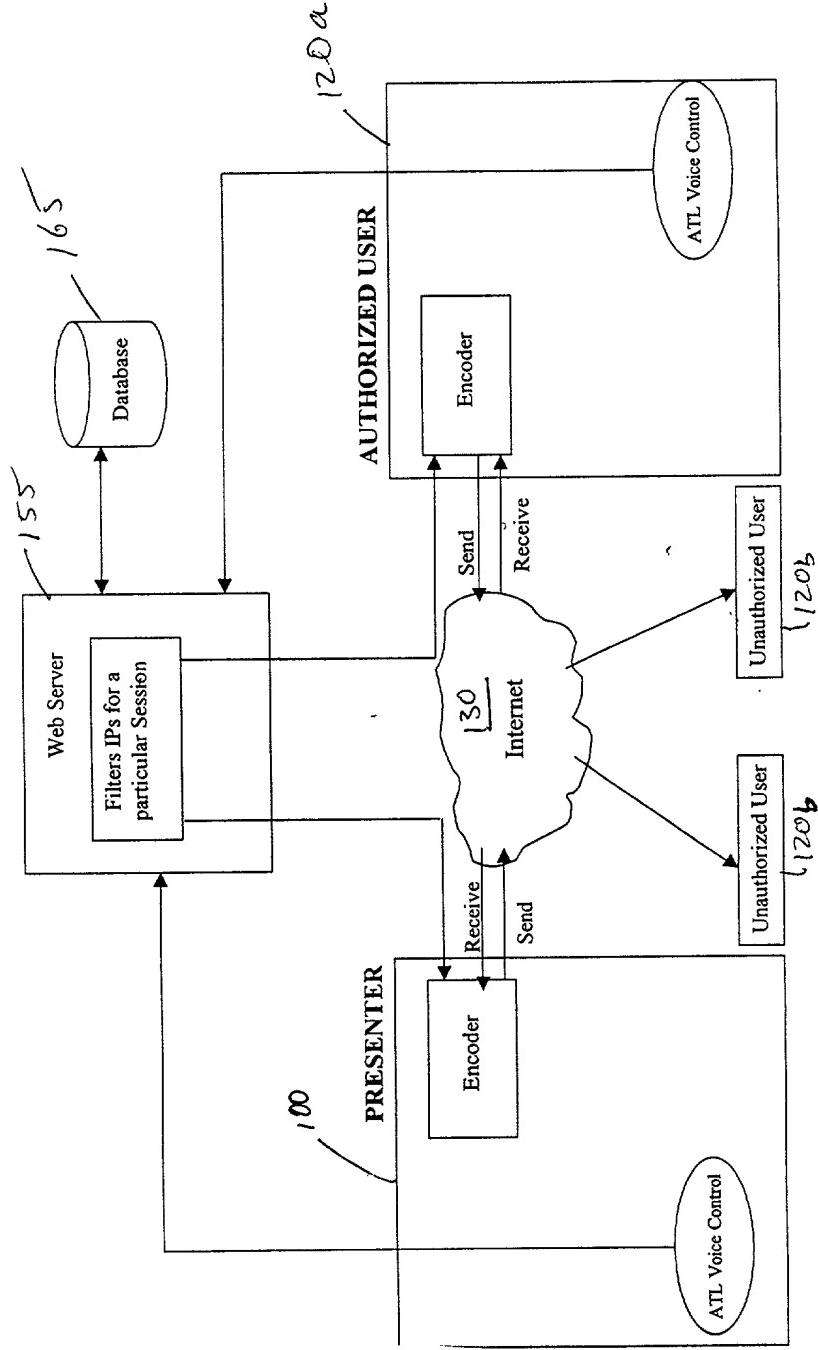


Figure 15

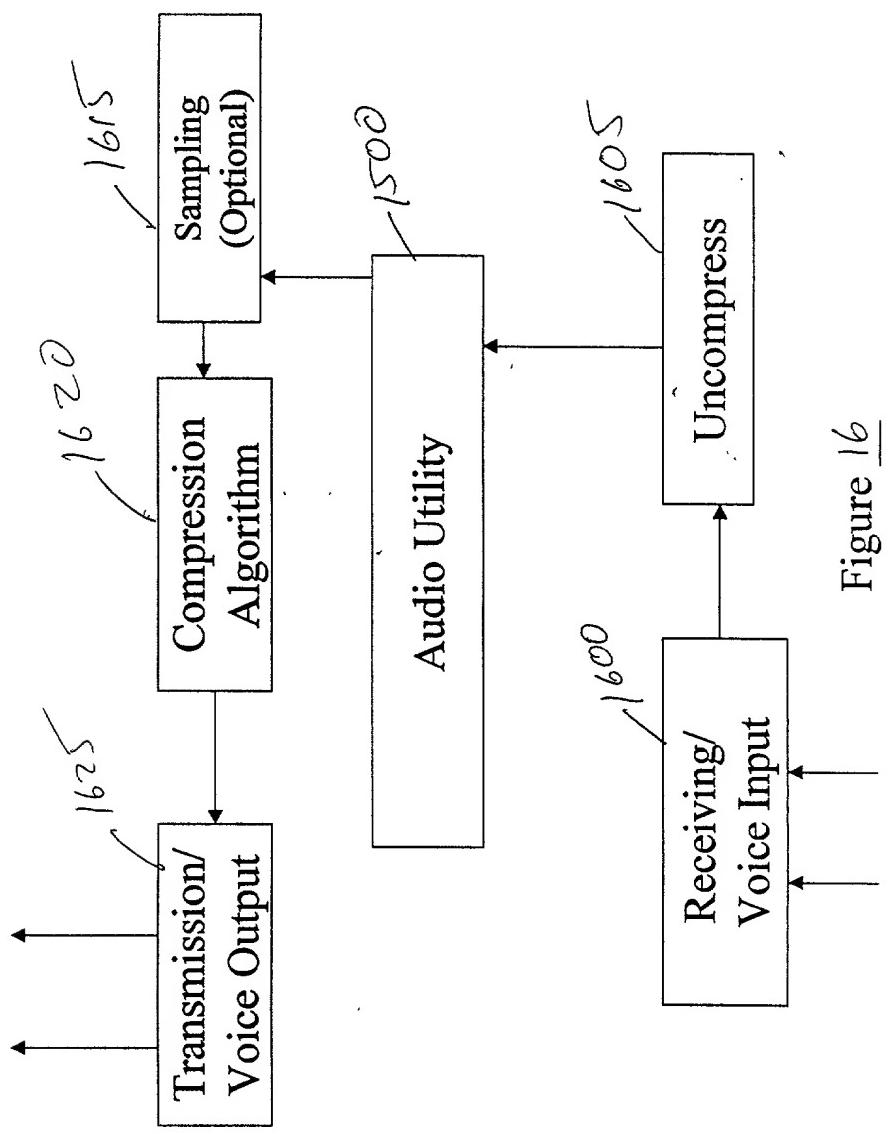


Figure 16

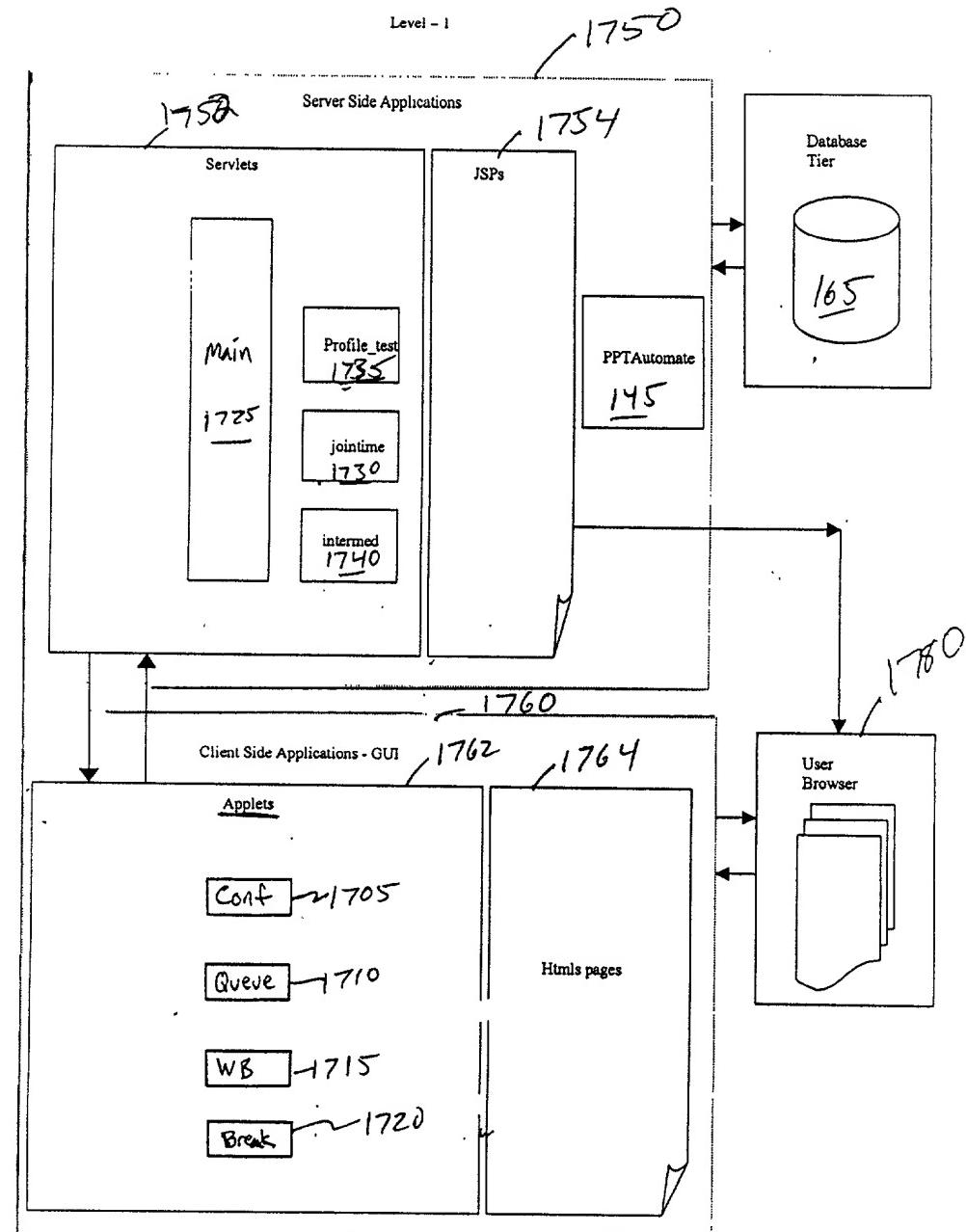


Figure 17a

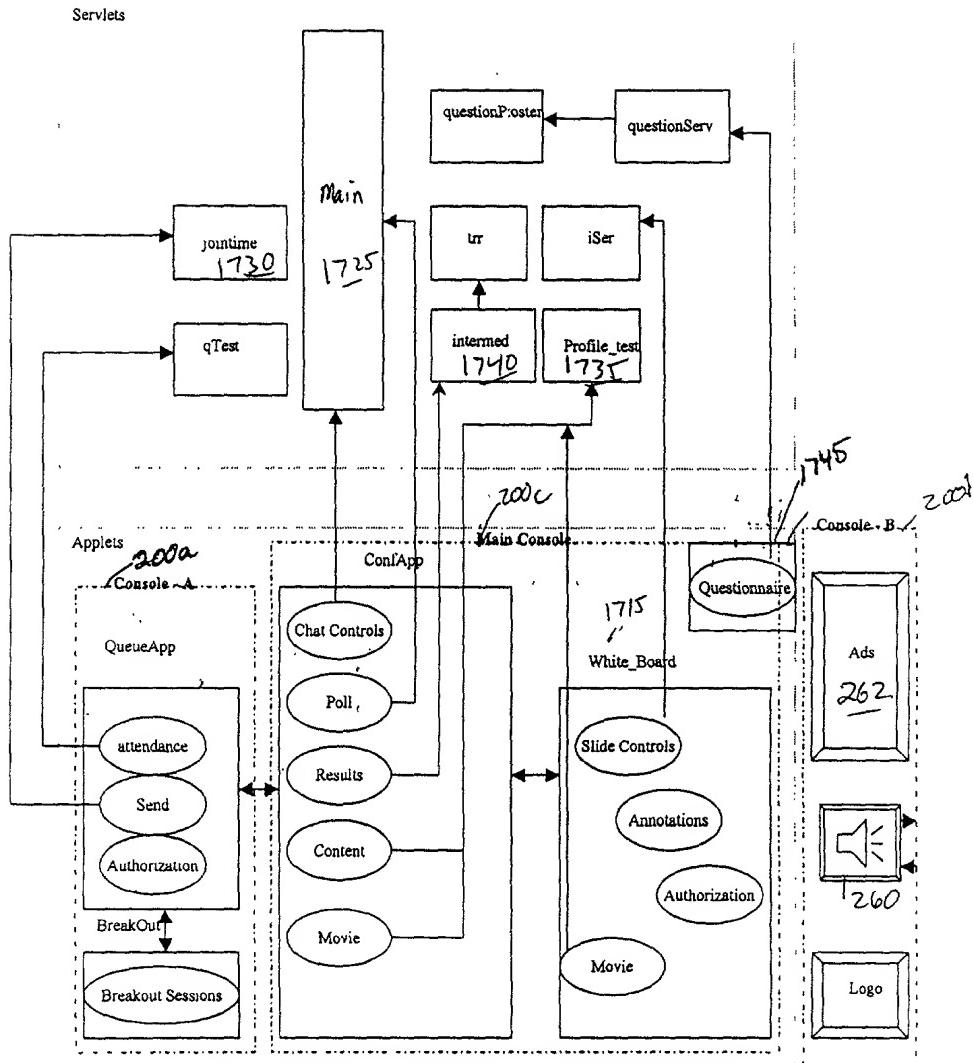


Figure 176

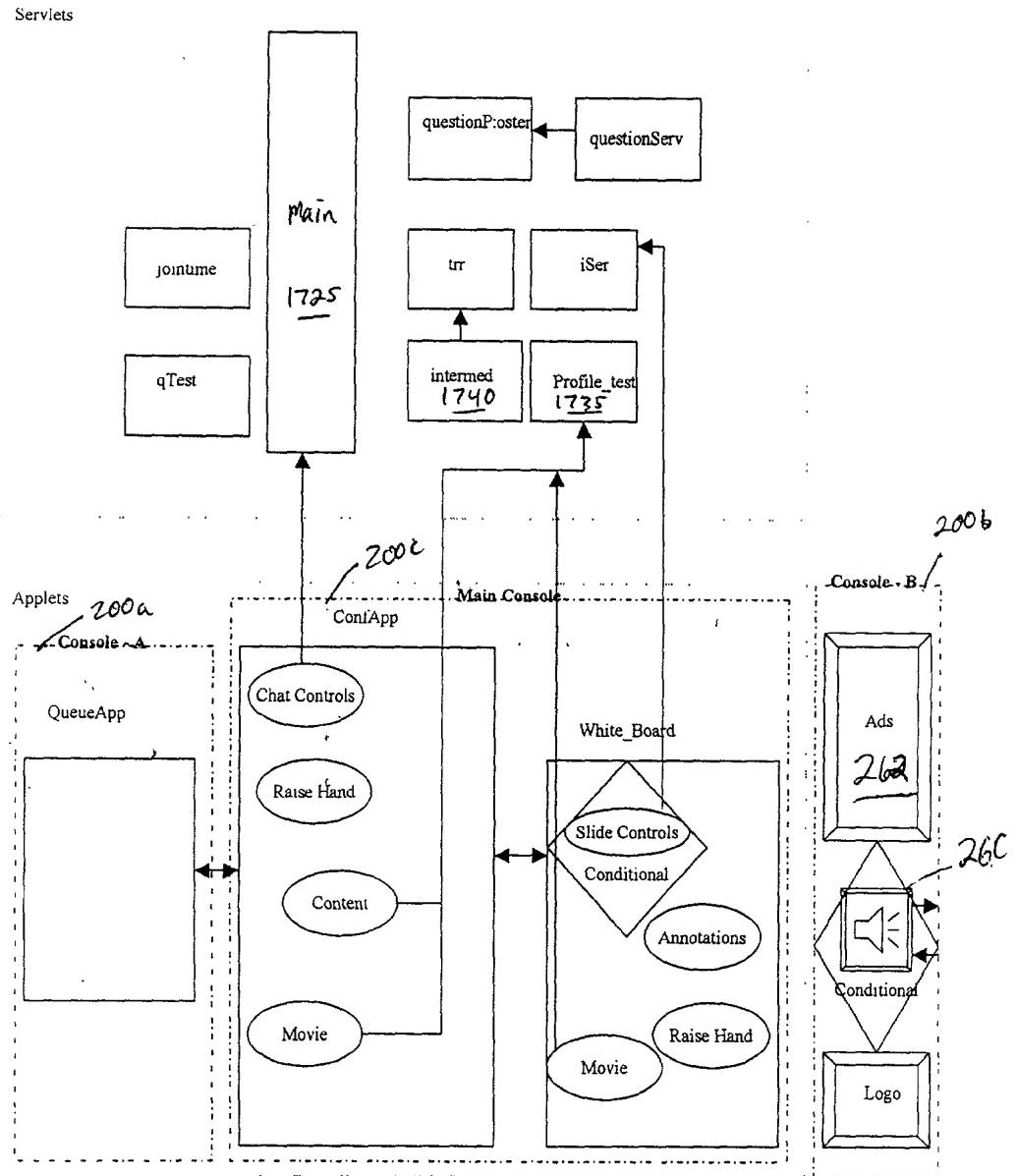


Figure 17c

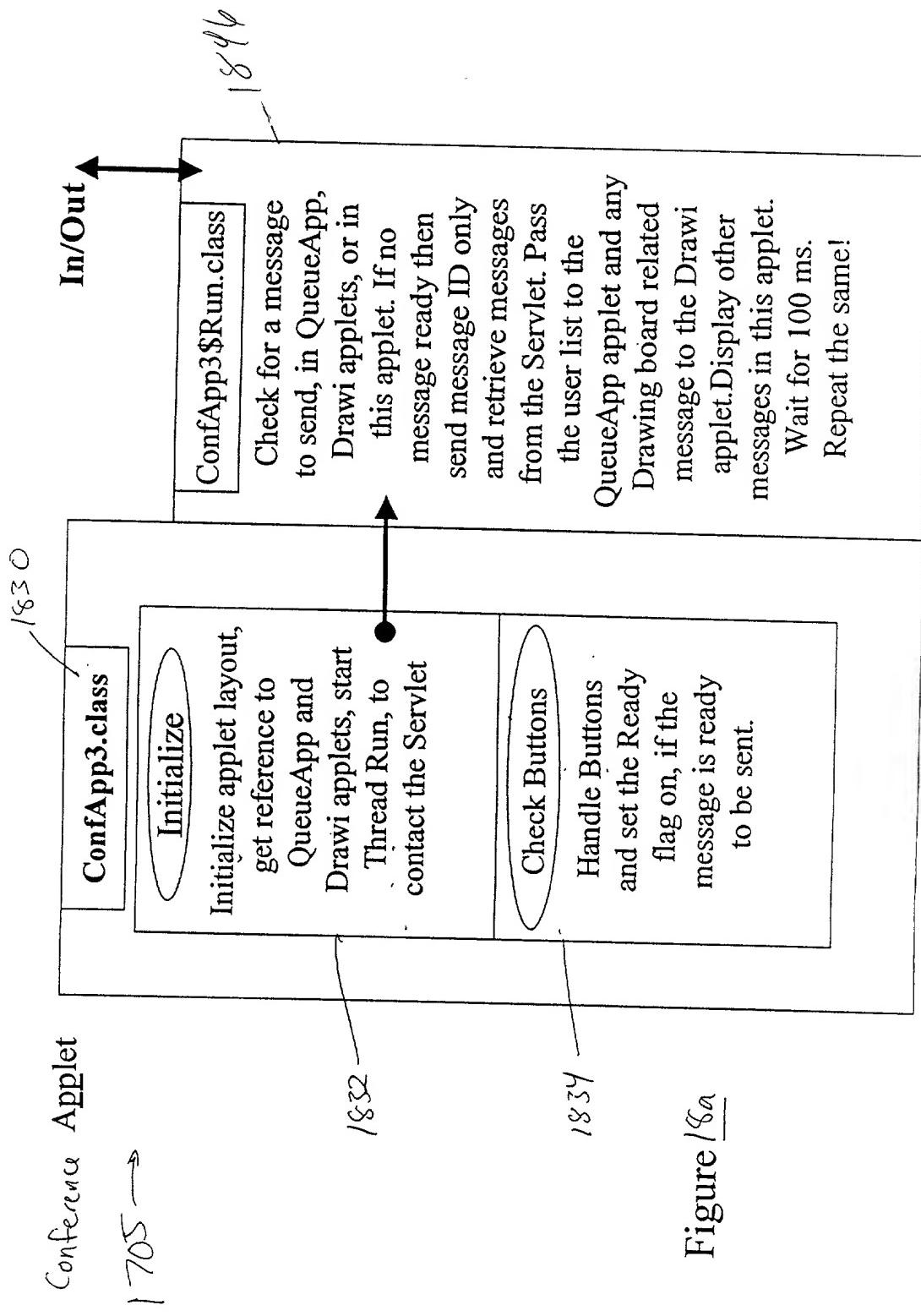
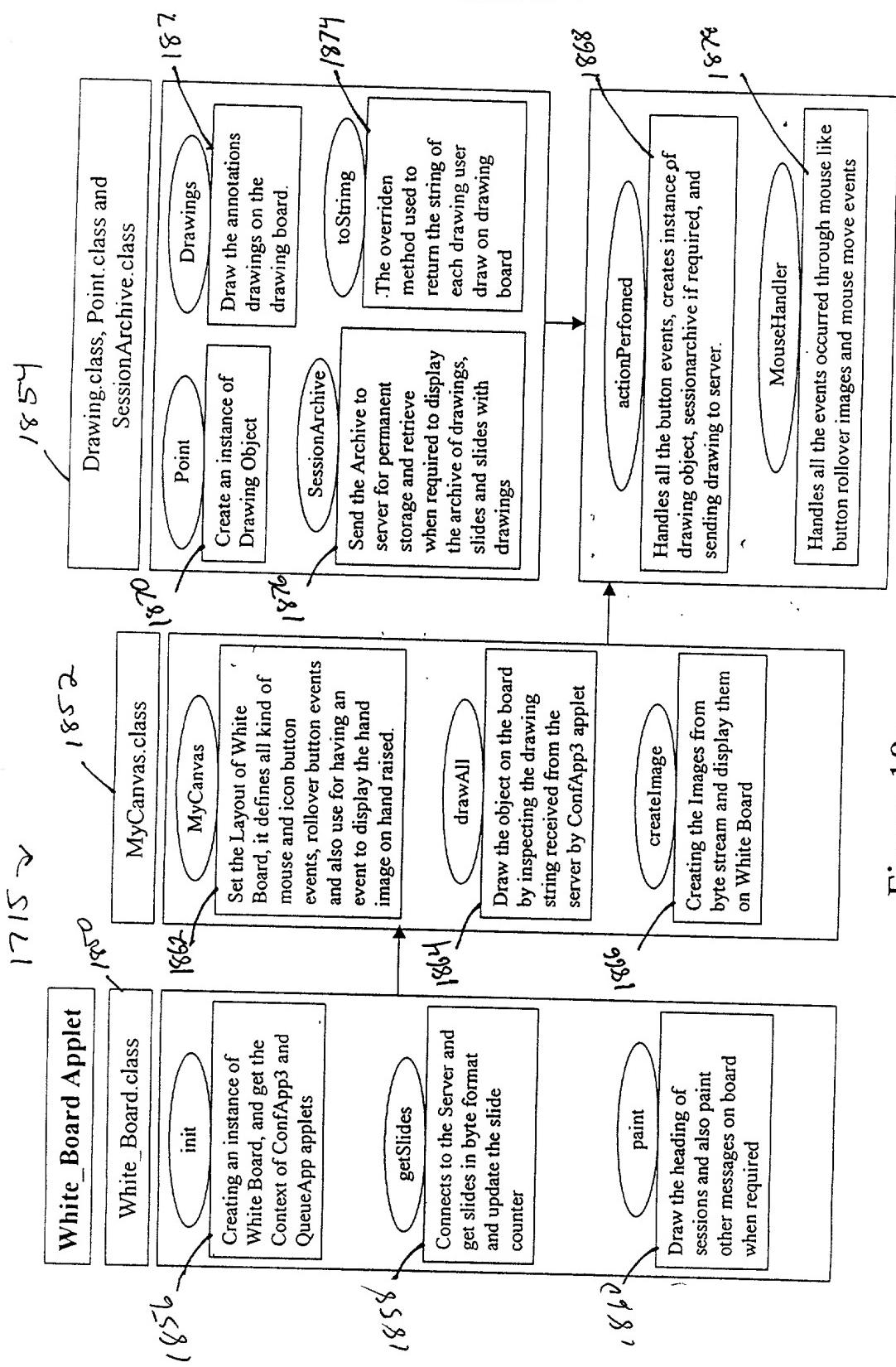


Figure 18a



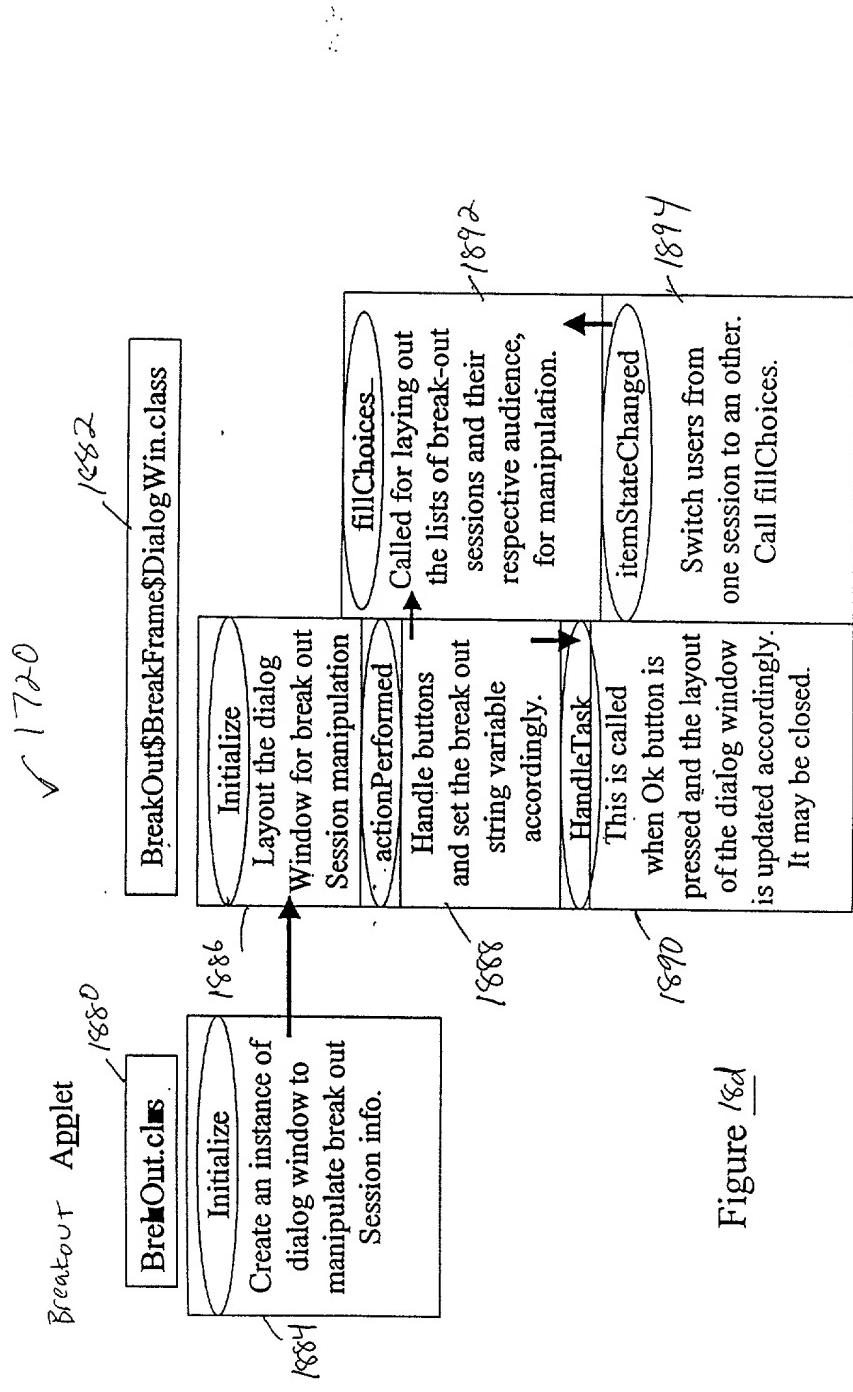


Figure 16d

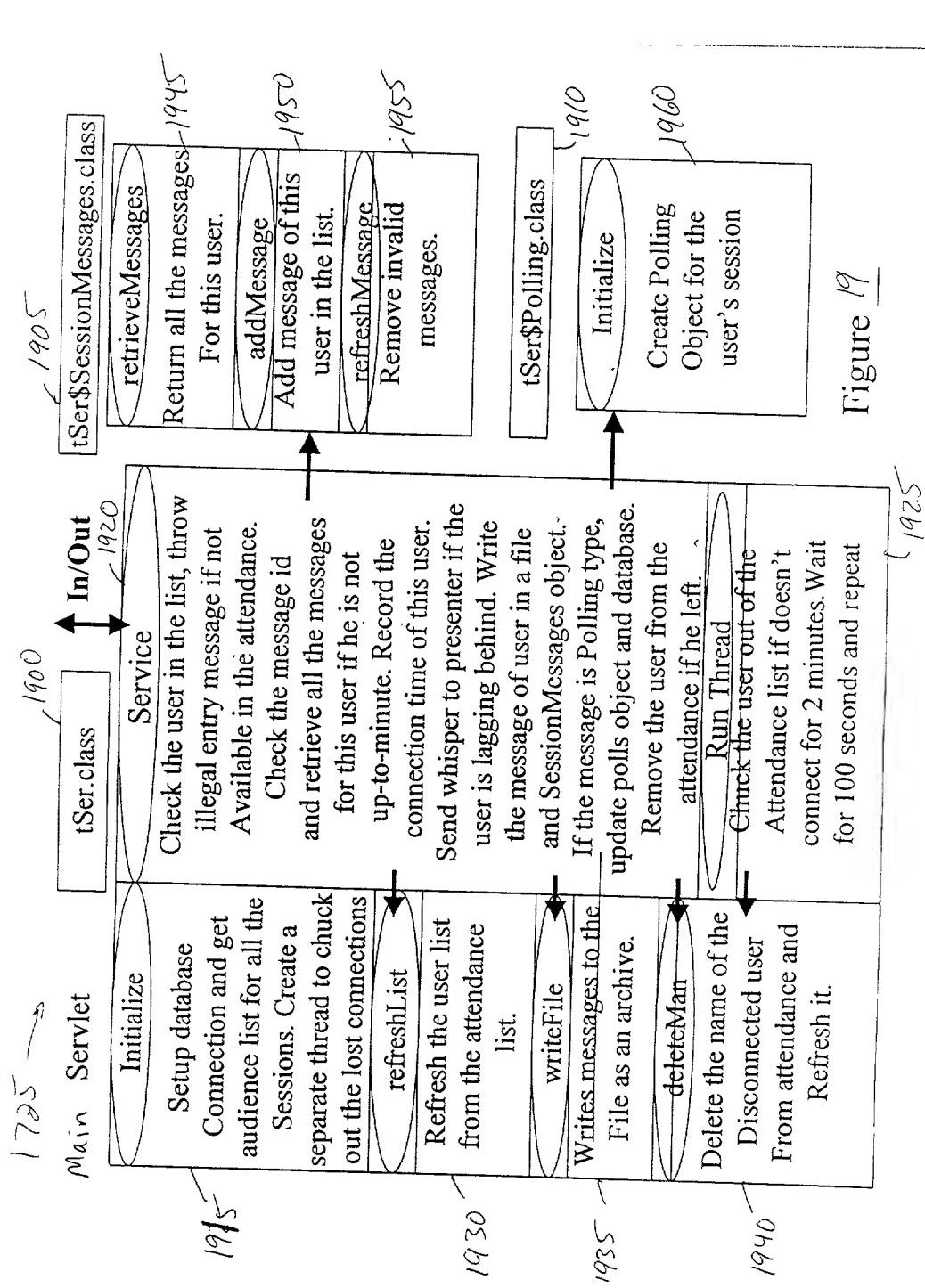


Figure 19

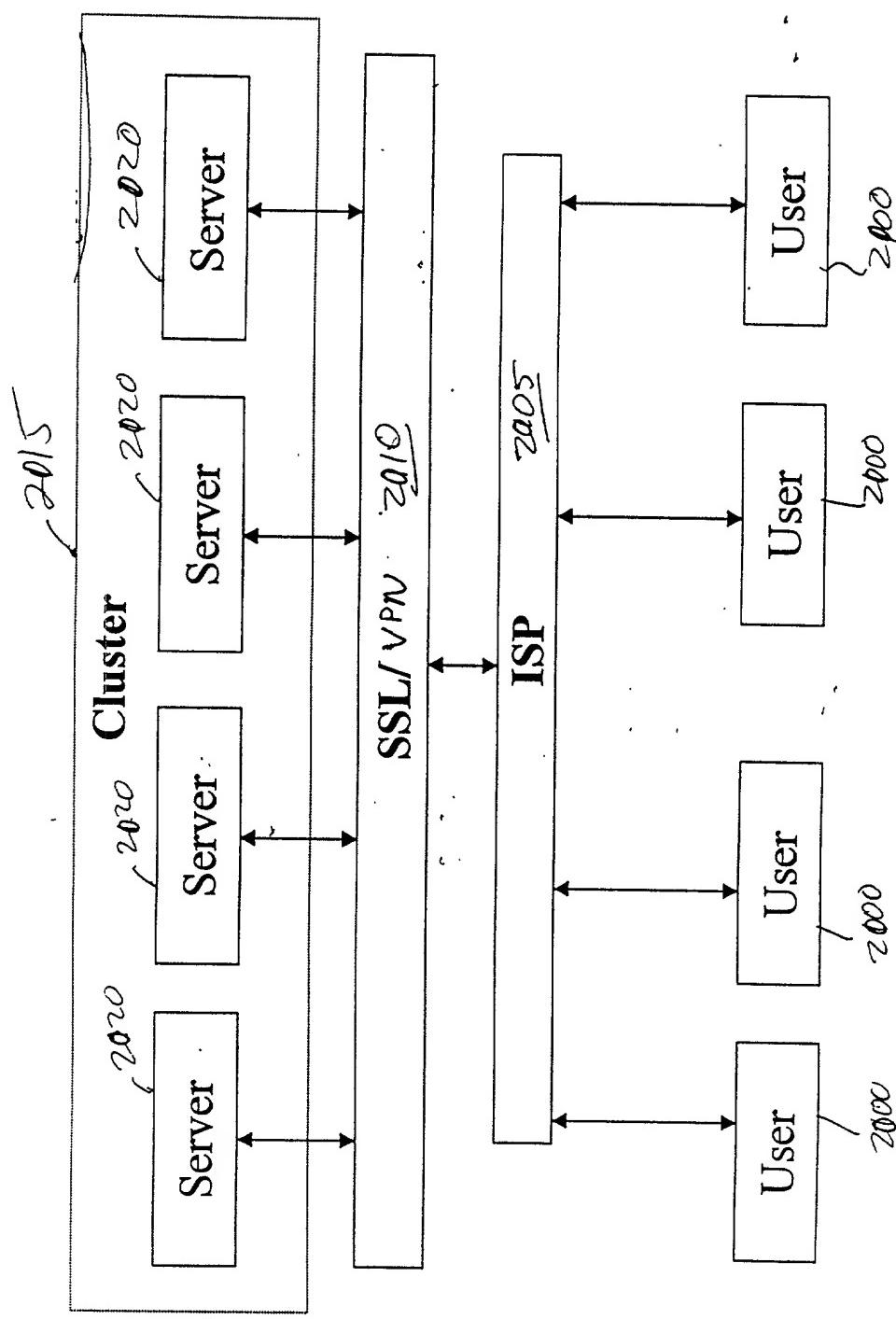


Figure 20

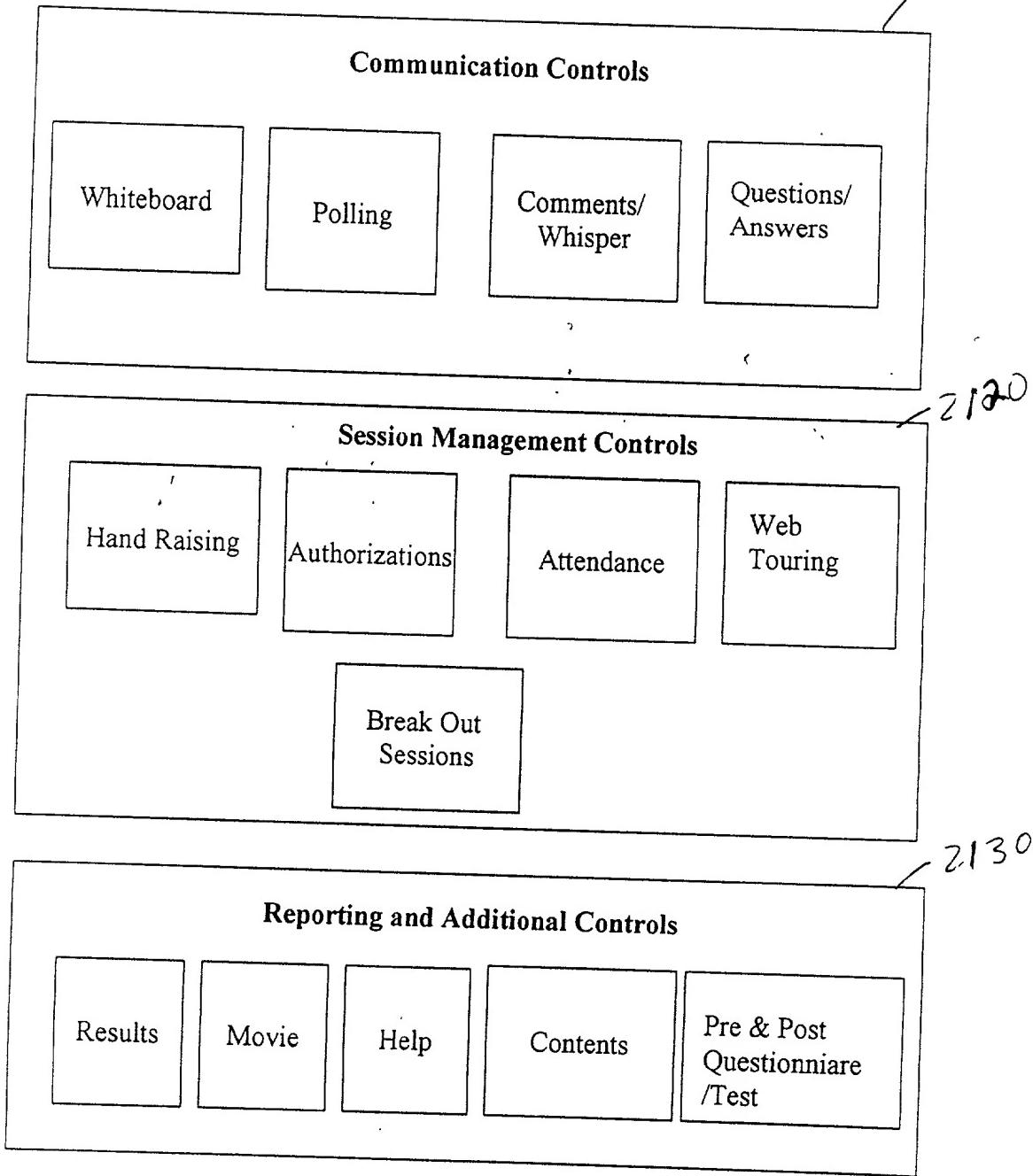


Figure 2.1

Figure 23

